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** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/26/1998					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>Boys</i> Initials <i>alb</i>		STATE OR COUNTRY OH	SHEETS DRAWING 6	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 5
ADDRESS 29052					
TITLE ELECTRONIC BILL PAYMENT SYSTEM WITH MERCHANT IDENTIFICATION					
FILING FEE RECEIVED 1334	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		